

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UST Inc. Executives Administrators and Managers Political Action Committee

Full Name (Last, First, Middle Initial)

A. Great Plains Leadership FundMailing Address 818 Connecticut Ave. NW #1100
Suite 1100

City Washington State DC Zip Code 20006

Purpose of Disbursement
2007 Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 56448-0739753842

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	7

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Rangel for CongressMailing Address PO Box 5577
Manhattanville Station

City New York State NY Zip Code 10027

Purpose of Disbursement
2008 PRIMARYCandidate Name
Charles Rangel

011

Category/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 15

Transaction ID: 56448-9380593896

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	7

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Rely on Your Beliefs Fund

Mailing Address 209 Pennsylvania Avenue Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement
2007 Contribution

Candidate Name

011

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 56448-8101025224

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	7

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

19000.00